

numerous adenomatous nodules scattered throughout the colloid tissue. The case progressed smoothly. Soon after the patient returned home symptoms of cachexia developed. After two years, as a hard tumor developed in the sternum, the cachectic symptoms improved, and finally disappeared. Four years later the rapidly-growing tumor gave rise to such lancinating pains that the patient submitted to the removal of the manubrium sterni. The tumor presented the picture of carcinoma with colloid degeneration. Nine days after the operation a severe tetany developed, which gradually led into cachexia thyreoida. The tumor was a bone metastasis, and not an accessory thyreoid. What is interesting is that a metastasis should be capable of assuming a physiological function. The therapy of the case consisted in the eating of thyreoids. This method of treatment has been practised by Von Eiselsberg with excellent result in cases of myxœdema. A case of spontaneous myxœdema in a twenty-two-year-old virgin, who was treated in this manner for several months, developed symptoms of poisoning,—symptoms resembling Basedow's disease. In this case, before the treatment was begun, the hair of the scalp began to fall out, and a growth of hair occurred on the face, arms, and breast. After the feeding with thyreoids was begun, the growth of hair on the head returned, and the hair in the abnormal places fell out.

The glands are best administered raw in wafers. In the beginning they should be given just before meals, but later on they may be administered an hour or two earlier.—*Verhandlungen der deutschen Gesellschaft für Chirurgie*, xxiii Kongress, 1894.

IV. A Case of Acute Myxœdema. By Dr. SONNENBURG (Berlin). In this case, notwithstanding that a bit of the gland was left after the operation for goitre, acute myxœdema developed. The operation, which consisted in the removal of a large tumor involving especially the left side and compressing the trachea, had to be done during the seventh month of pregnancy, because of the sudden appearance of symptoms of asphyxia. A few weeks after the opera-

tion the characteristic symptoms of cachexia strumipriva appeared. Feeding with sheep's and calves' thyroids (according to Kocher's method) brought the patient through the life-threatening cachexia, and caused a great improvement in her general condition. The discharge of a whitish, creamy, fatless pus, which had been accompanied with no fever, quickly ceased after the treatment was begun.—*Verhandlungen der deutschen Gesellschaft für Chirurgie*, xxiii Kongress, 1894.

HEAD AND NECK.

I. Craniectomy in Microcephalus. By Dr. H. TILLMANN (Leipzig). Lannelongue was the first to recommend craniectomy in microcephalus and other brain-diseases. He operated upon a large number of cases. He has reported twenty-five craniectomies in children, from eight months to twelve years of age, with one death and remarkably good results in the other cases, especially observed in improvement of the intelligence and general condition. These favorable results in microcephalus have not been accomplished by other surgeons who have resorted to craniectomy. The operation consisted usually in the extirpation of a strip of bone about one centimetre broad and ten or twelve centimetres long, parallel with the longitudinal sulcus and about two finger-breadths therefrom, involving the frontal and parietal bones. Many surgeons have made even longer and wider openings than these, involving the frontal, parietal, and occipital bones. Some have divided the skull into two parts by a circular operation, so that the upper segment was movable. The object of craniectomy in microcephalus is to remove the abnormal pressure upon the brain and allow a freer growth of the latter.

Tillmanns regards the operation as of no value in the greatest number of cases of microcephalus, because in most cases the disease represents a congenital misformation of the brain itself which cannot be influenced by the production of defects in the skull. The growth of the brain in cases of microcephalus is usually not hindered by the bones of the skull, but the skull grows too little because the enclosed